

minority where a parent is bent on injury to the child. The question is whether it is best to draft policies that get the best out of the majority of families, particularly when large socio-economic factors are the ultimate root of the problem, or whether all families have to endure rigid and exclusive procedures for the sake of the minority of hostile and dangerous parents.

Family participation at case conferences is a social work practice with health implications. General paediatricians attend very few case conferences and they are more likely to be initial than review. The alleged abuse is more likely fresh than old and the injuries more likely serious than trivial. These will be the most difficult of cases and it is tempting to become cynical about the development of partnership with parents. Doctors should also be able to judge the success of parental attendance as a basic standard of practice in the hundreds of 'bread and butter' review conferences that they do not attend. At the same time they need to

lobby for improved funding, training, and resources in child protection. I have no doubt that this way of working demands much more of us, though it promises more humane results.

- 1 Phillips J. Parental participation in case conferences. *Cardiff conference proceedings*. Rochdale: BAPSCAN Jacob Brights Childrens Centre, 1986.
- 2 McGloin P, Turnbull A. *Parental participation in child abuse review conferences*. Greenwich: London Borough of Greenwich, 1986.
- 3 University of East Anglia and Hackney Social Service Departments. *Parental attendance at child protection case conferences*. London: London Borough of Hackney, 1991. (A training video available from Training Section, London Borough of Hackney Social Services Department, Lawrence House 4th floor, 238 City Road, London EC1V 2PR.)
- 4 Thorburn J, Lewis A, Shemmings D. *Family involvement in child protection conferences*. Norwich: Social Work Development Unit, University of East Anglia, 1991.
- 5 Butler-Sloss E. *Report of the inquiry into child abuse in Cleveland 1987*. London: HMSO, 1988.
- 6 Department of Health and Social Security and the Welsh Office. *Working together. A guide to arrangements for inter-agency co-operation for the protection of children from abuse*. London: HMSO, 1988.
- 7 Home Office. *Working together under the Children Act 1989*. London: HMSO, 1991.

## Parental participation in case conferences: the case against

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I believe that the mandatory invitation of parents to all child protection case conferences would work against the protection of children. This does not mean that I think parents should be excluded from all case conferences. It may even be right that they be invited to most of them. However, neither the Children Act 1989 nor the guidance document *Working Together*<sup>1</sup> requires the mandatory invitation of parents to all case conferences, and there is provision for proper exclusion criteria to be developed. Exclusion should be for the right reasons, and paediatricians have a part to play in defining what these are.

Wrong reasons for excluding parents from case conferences would be that we would be too embarrassed to speak freely, that we would not like to be seen to be criticising parents, or that we would find it impossible to work with the family in the future. These are problems that we have learned to overcome in other areas of clinical practice, and can overcome in the field of child protection.

Paediatricians have a training and an instinct to work with the parents of patients, and to be open and honest with them at all times. We have developed, and teach our junior staff, the skills required to discuss what may be bad news in front of parents, and to include them in the discussion, as full and equal partners. Child abuse can be seen as just another difficult clinical problem which paediatricians have the skills to discuss with parents.

However, in child protection work, there are situations that are quite different from that of the difficult discussion of worries that are shared between parents and doctor, and these are what cause me concern.

My personal concern arose from information that certain area child protection committees (ACPCs) were proposing the mandatory invitation of parents to attend throughout all review case conferences, and possibly, later, to all case conferences, and that this was threatening to lead to the withdrawal of paediatric participation from child protection work (ANP Speight, personal communication).

Parental attendance at all case conferences would include those cases where abuse arose from deliberate acts committed by parents against their children, and in particular, where there has been denial that such acts were committed, or that the parents could have been involved. This situation is particularly likely to occur in cases of sexual abuse.

The case conference exists to share information, to take decisions about whether the child's name should be put on the child protection register, and to make recommendations about a child protection plan, if necessary. Its function is not to pass official judgment on whether abuse has occurred, still less to convict anyone of it (*Working Together*,<sup>1</sup> para 6.1). If the case conference exists to discuss reasonable concerns about a child, whose fundamental

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basis is totally denied by the parents, it is hard to see how the presence of parents can contribute to the planning of the future protection of the child. A court of law is the place to hammer out such fundamental disagreements, not a case conference.

What is worse, the presence of parents could, in some instances, itself put children in danger. One of the well known features of the syndrome of child sexual abuse is the pressure on the child to keep secrecy. Perpetrators use threats, fear, and, occasionally, murder, to keep their victims silent. The difficult, delicate, and unpredictable nature of the process of disclosure of child sexual abuse is well described, for example by Furniss.<sup>2</sup> Premature disclosure to the perpetrator, of the detailed reasons for suspicion of sexual abuse, can lead to intensification of the pressure on the child, and ultimate failure of the attempt to protect (see, for example Furniss: p173<sup>2</sup>). To include the alleged perpetrator in a case conference, and hope that the process of disclosure had advanced sufficiently for that not to endanger the child, would seem to me excessively risky.

Of course, parents need to be told what children have said, and what other evidence there is, but this needs to be carefully managed and timed in such a way as not to put children in danger. Particularly in cases of sexual abuse, the timetable of these discussions with parents needs not to be forced by a mandatory need to have it all done before the case conference.

There has been a tendency to focus too much on parental attendance at case conferences, as if it were the only expression of parents' participation in the child protection process. Where does this come from? The Cleveland report was particularly critical of parents being left in a situation of isolation and lack of support.<sup>3</sup> This included lack of information about what was happening to their children, lack of contact, and prolonged separation without adequate explanation. The report made a number of recommendations on how parents should be kept fully informed, treated with respect, and supported throughout the investigation, of which only one was that they be invited to attend case conferences *unless* 'in the view of the Chairman ... , their presence will preclude a full and proper consideration of the child's interests' (Cleveland report: p246, 4(e)<sup>3</sup>). This is a far cry from recommending mandatory invitation to all case conferences.

Much has been made, quite rightly, of the emphasis in the Children Act on partnership with parents, *where possible*. However, let us not forget that the primary purpose of the Children Act is to ensure that the welfare of children is regarded as paramount. The guidance document *Working Together* refers specifically to parental attendance at case conferences, and nowhere suggests that invitations to attend be a mandatory requirement.<sup>1</sup> The wording states 'It is important that ACPCs should formally agree *the principle* of including parents and children in all conferences' (para 6.14, my emphasis), but also that they should define those criteria which will lead to exclusion of parents. This does not mean 'mandatory inclusion'.

The ACPC of which I am a member is developing (late, because of a prolonged spell of industrial action) policies along these lines. Proper respect is to be paid to parents, and they are to be prepared and counselled in what to expect in the child protection process, including attendance at case conferences. Criteria for exclusion of parents from case conferences are laid down, including where, in the opinion of the chair, their attendance would preclude a full and proper consideration of the interests of the child, whose welfare is duly recognised as paramount (Barnsley ACPC: internal working documents).

Paediatricians sitting on ACPCs, or invited to submit advice to them on policy matters, should be encouraged to insist that the *mandatory* invitation of parents to *all* case conferences is neither desirable, nor recommended by inquiry reports, nor required by legislation or subsequent guidance documents. While the inclusion of parents in most case conferences may well be desirable, it should be done sensitively and constructively, and paediatricians can contribute to the development of such policies. Exclusion criteria should be defined so that they apply when parental attendance is likely to hinder the protection of the child. Attempts to 'steamroller' through mandatory invitation of parents to all case conferences 'because the Children Act says so', should be vigorously resisted.

1 Home Office. *Working Together under the Children Act 1989*. London: HMSO, 1991.

2 Furniss T. *The multi-professional handbook of child sexual abuse*. London: Routledge, 1991.

3 Butler-Sloss E. *Report of the inquiry into child abuse in Cleveland 1987*. London: HMSO, 1988.